

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Future45			FEC IDENTIFICATION NUMBER ▼ C C00574533		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee 45Committee			Date of Public Distribution/Dissemination 12 / 15 / 2015		
Mailing Address P.O. Box 710993			Amount 38000.00		
City Herndon	State VA	Zip Code 20171	Transaction ID : SE.4181		
Purpose of Expenditure media production/film footage		Category/ Type 004	Date of Disbursement or Obligation 12 / 17 / 2015		
Name of Federal Candidate Hillary Clinton			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 0.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Arena Online			Date of Public Distribution/Dissemination 12 / 15 / 2015		
Mailing Address 1780 West Sequoia Vista Circle			Amount 2300.00		
City Salt Lake City	State UT	Zip Code 84104	Transaction ID : SE.4184		
Purpose of Expenditure Media placement		Category/ Type 004	Date of Disbursement or Obligation 12 / 17 / 2015		
Name of Federal Candidate Hillary Clinton			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 0.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			40300.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Maria Wojciechowski</u> <div style="text-align: right;">[Electronically Filed]</div>			Date 12 / 17 / 2015		

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Form/Schedule: F24N

Transaction ID :

Due to an FECfile technical problem, the 'Calendar Year-to-Date Per Election for Office Sought' box is \$0.00. The actual year-to-date amount is \$342,750.59. We will file an amended Form 24 once the technical issue has been resolved.

Form/Schedule:

Transaction ID:

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Outlaw Media		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 15 / 2015	
Mailing Address 1000 Wilson Blvd, Suite 2600		Amount 3000.00	
City Arlington	State VA	Zip Code 22209	Transaction ID : SE.4182
Purpose of Expenditure Media production	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2015	
Name of Federal Candidate Hillary Clinton		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Red Eagle Media Group		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 15 / 2015	
Mailing Address 815 Slaters Lane		Amount 25776.71	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.4183
Purpose of Expenditure Media placement	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 12 / 17 / 2015	
Name of Federal Candidate Hillary Clinton		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	28776.71
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	69076.71

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Maria Wojciechowski

[Electronically Filed]

Date

MM / DD / YYYY
12 / 17 / 2015

Signature